APS HEALTHCARE
Healthy Together

California EQRO

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This outline is a compilation of the "Road Map to a PIP" and the PIP Validation Tool that CAEQRO is required to use in evaluating PIPs. The use of this format for PIP submission will assure that the MHP addresses all of the required elements of a PIP.

If the MHP is submitting a PIP that was previously submitted, please ensure that this document reflects and emphasizes the work completed over the past year.

CAEQRO PIP Outline via Road Map

MHP:
Date PIP Began:
Title of PIP:
Clinical or Non-Clinical:

Assemble multi-functional team

1. Describe the stakeholders who are involved in developing and implementing this PIP.

"Is t here really a problem?"

2. Define the problem by describing the data reviewed and relevant benchmarks. Explain why this is a problem priority for the MHP, how it is within the MHP's scope of influence, and what specific consumer population it affects.

Team Brainstorming: "Why is this happening?"
Root cause analysis to identify challenges/barriers

3. a) Describe the data and other information gathered and analyzed to understand the barriers/causes of the problem that affects the mental health status, functional status, or satisfaction. How did you use the data and information to understand the problem?

    b) What are barriers/causes that require intervention? <u>Use Table A, and attach any charts, graphs, or tables to display the data.</u>

Table A – List of Validated Causes/Barriers

Describe Cause/Barrier	Briefly describe data examined to validate the barrier

Formulate the study question

4.   State the study question.
This should be a single question in 1-2 sentences which specifically identifies the problem that the interventions are targeted to improve.

5.   Does this PIP include all beneficiaries for whom the study question applies? If not, please explain.

6.   Describe the population to be included in the PIP, including the number of beneficiaries.

7.   Describe how the population is being identified for the collection of data.

8.   a)   If a sampling technique was used, how did the MHP ensure that the sample was selected without bias?

        b)   How many beneficiaries are in the sample? Is the sample size large enough to render a fair interpretation?

<div style="text-align: center; font-weight: bold; border: 1px solid black; background-color: #e0e0d0; padding: 10px;">
"How can we try to address the broken elements/barriers?"
Planned interventions
</div>

Specify the performance indicators in Table B and the Interventions in Table C.

9. a) Why were these performance indicators selected?

    b) How do these performance indicators measure changes in mental health status, functional status, beneficiary satisfaction, or process of care with strong associations for improved outcomes?

Remember the difference between *percentage* changed and *percentage points* changed – a very common error in reporting the goal and also in the re-measurement process.

Table B – List of Performance Indicators, Baselines, and Goals

#	Describe Performance Indicator	Numerator	Denominator	Baseline for performance indicator	Goal
1					
2					
3					
4					
5					

10.   Use Table C to summarize interventions. In column 2, describe each intervention. Then, for each intervention, in column 3, identify the barriers/causes each intervention is designed to address. Do not cluster different interventions together.

Table C - Interventions

Number of Intervention	List each specific intervention	Barrier(s)/causes each specific intervention is designed to target	Dates Applied
1			
2			
3			
4			
5			
6			
7			

Apply Interventions: "What do we see?"
Data analysis: apply intervention, measure, interpret

11.   Describe the data to be collected.

12.   Describe method of the data collection and the sources of the data to be collected. Did you use existing data from your Information System? If not, please explain why.

13.   Describe the plan for data analysis. Include contingencies for untoward results.

14.   Identify the staff that will be collecting data as well as their qualifications, including contractual, temporary, or consultative personnel.

15.   Describe the data analysis process. Did it occur as planned? Did results trigger modifications to the project or its interventions? Did analysis trigger other QI projects?

16.   Present objective data results for each performance indicator. <u>Use Table D and attach supporting data as tables, charts, or graphs.</u>

Table D - Table of Results for Each Performance Indicator and Each Measurement Period

Describe performance indicator	Date of baseline measurement	Baseline measurement (numerator/ denominator)	Goal for % improvement	Intervention applied & dates applied	Date of re-measurement	Re-measurement Results (numerator/ denominator)	% improvement achieved
THIS IS THE BASELINE INFORMATION FROM TABLES A, B, AND C USED HERE FOR COMPARISON AGAINST RESULTS							

"Was the PIP successful?" What are the outcomes?

17.   Describe issues associated with data analysis:

a.   Data cycles clearly identify when measurements occur.

b.   Statistical significance

c. Are there any factors that influence comparability of the initial and repeat measures?

d. Are there any factors that threaten the internal or the external validity?

18.   To what extent was the PIP successful? Describe any follow-up activities and their success.

19.   Describe how the methodology used at baseline measurement was the same methodology used when the measurement was repeated. Were there any modifications based upon the results?

20.   Does data analysis demonstrate an improvement in processes or client outcomes?

21.   Describe the "face validity" – how the improvement appears to be the result of the PIP intervention(s).

22.   Describe statistical evidence that supports that the improvement is true improvement.

23.   Was the improvement sustained over repeated measurements over comparable time periods?